



Letter to the Editor

Letter to the editor: Response to “Assessing the presence of female DNA on post-coital penile swabs: Relevance to the investigation of sexual assault” published in the October 2012 edition of the Journal of Forensic and Legal Medicine



Dear editor,

I write in response to “Assessing the presence of female DNA on post-coital penile swabs: Relevance to the investigation of sexual assault” published in the October 2012 edition of the *Journal of Forensic and Legal Medicine*. Farmen et al. are to be congratulated on the very interesting research findings that they have disseminated. The researchers investigate whether female vaginal epithelial cells can be found on penile swabs taken after consensual vaginal intercourse and, furthermore, quantify the extent of the female DNA profile that could be subsequently recovered. In the study, female DNA was recovered on all post-coital penile swabs taken up to 24 h after intercourse, with the highest recovery rate (~90% of the full DNA profile) being within 12 h of intercourse. The authors point out that this high recovery rate deviates from previous research that has examined such recovery rates in real rape cases. The real-life practical change that this research study should contribute to is the strengthening of forensic medical examination procedures in the case of the alleged perpetrator of sexual crime. Most emphasis to date has been correctly placed upon ensuring that the forensic medical needs of the victim of sexual crime are appropriately addressed. As such, we have, for example in Ireland, developed a network of Sexual Assault Treatment Units, with robust operating procedures and skilled personnel. However, if we really want to provide the best possible outcome for victims of such crimes, we must ensure that the alleged perpetrator is also appropriately forensically examined. The difference between the high recovery rate in the present study and that seen in real cases of rape may be addressed by

developing a system that ensures timely examination of alleged perpetrators by appropriately skilled clinicians. Such a system could only improve the final outcome for the victim. Whilst our neighbours in the UK have a well-developed forensic medical service that can, by and large, be easily accessed by the police, the same cannot be said of many other European countries where such services are provided in a less-well-organised fashion. Thank you to Farmen et al. for providing research evidence that underlines the potential usefulness of thorough forensic medical examination of alleged perpetrators of sexual violence.

Yours sincerely,
Dr Kieran Kennedy.

Conflict of interest
None.

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